| <b>ICKETS PROVIDED</b> | B | ۲ |
|------------------------|---|---|
| AGENCY REPO            | R | T |

| 1. Agency Name                                  |                         |                       |                     | Date Stamp   | California         | 902         |
|---|-------------------------|-----------------------|---------------------|--|--------------------|-------------|
| County of Los Angeles                           |                         |                       | NOTE:               | Form   | 002                |             |
| Division, Department, or Region (if applicable) |                         |                       |                     | For Official Us  | se Only            |             |
| Board of Supervisor                             |                         |                       |                     |  |                    |             |
| Street Address                                  |                         |                       |                     |  |                    |             |
| 500 W. Temple St., Room 8                       | 69 Los Angeles, C       | A 90012               |                     |  |                    |             |
| Area Code/Phone Number                          | E-mail                  | -200000               | -                   | Amendment (Must ex   | unfain in Dard E.) |             |
| 213-974-5555                                    | fifthdistrict.lacbos    | .org                  |                     | Amendment (Must ex   | ¢piain in Paπ 5.)  |             |
| Agency Contact (name and title)                 | 27                      | <del></del>           |                     | Date of Original Filing: _   | (month, day, year) |             |
| Linda Balderrama                                |                         |                       |                     |  | (month, day, year) |             |
| 2. Event For Which Tickets                      | Were Distribute         | ed                    |                     | C CAMPED   |                    |             |
| Date(s) of Event: 09 / 0                        | 4 / 09 Desc             | rintion of Eve        | nt: Los Angeles     | s County Fair  |                    |             |
|   | - 00                    |                       |                     | 47.00  |                    |             |
|   | Face                    | Value of Tick         | et: \$              |  |                    |             |
| Agency Event Yes                                | ☑ No (Identify s        | ource of ticke        | ets below.)         |  |                    |             |
| Name of Outside Source of                       | Ficket(s) Provided t    | to Agency. Lo         | s Angeles Cou       | nty Fair   |                    |             |
|   |                         |                       |                     |  |                    |             |
| Number of Tickets Received                      |                         | Ticket(s) Pro         | vided to Agenc      | y: 🗵 Gratuitously  | ☐ Pursuant to      | Contract    |
| 2 Agangy Official(a) Dagai                      | ving Tiplest(s) (       |                       |                     | · Constitution · Cons |                    |             |
| 3. Agency Official(s) Recei                     |                         | se a continuatio      |                     | The street was proported about the control of the street o |                    |             |
| Name of Offic<br>(Last, First)                  | ial                     | Number<br>of Tickets  |                     | her the Distribution is Inc<br>be the Public Purpose fo  |                    | al or       |
| (,,   |                         | OI HCKets             | Desciii             | be the rubilc rulpose to   | T the Distribution |             |
|   |                         |                       |                     |  |                    |             |
|   |                         |                       |                     |  | n // mm - o        |             |
|   |                         |                       |                     |  |                    |             |
|   | W 1                     |                       |                     | W to:  |                    |             |
|   |                         |                       |                     |  |                    |             |
| 4. Individual or Organization                   | n Receiving Tic         | <b>ket(s)</b> (Provid | ded at the behest   | of an agency official.)  |                    |             |
| Name of Behesting Agency (                      | Series Ulises Guit      | terrez. Outrea        | ch Coordinator      | 3  |                    |             |
| Name of Benesting Agency (                      | Oπiciai:                |                       |                     | 112  |                    |             |
| Name of Individual or Organ                     | zation. Santa Anit      | a YMCA                |                     | Numbe  | er of Tickets:     | 10          |
|   |                         |                       |                     | Number   | or mokets          |             |
| Description of Organization:                    | Organization for you    | ouths                 |                     |  |                    |             |
|   |                         |                       | Manne               | f  | 0.4                | 04040       |
| Address of Organization:                        | 1 S. Mountain Ave       | •                     | Monrovi             | la   |                    | 91016       |
|   |                         |                       | A11000-01           |  | State              | Zip Code    |
| Purpose for Distribution: (De                   | scribe the public pur   | pose for the dis      | stribution to the o | rganization.)  |                    |             |
| Encouraging or recognizing                      | significant academ      | ic, athletic, or      | public achieve      | ments  |                    |             |
|   |                         |                       |                     |  |                    |             |
| 5. Verification                                 |                         |                       |                     |  |                    |             |
| I have determined that the distri               | bution of tickets set f | orth above is ir      | n accordance witl   | h the provisions of FPPC   | Regulation 1894    | 4.1.        |
| Bolder  | Linda Balde             | rrama                 | Ticke               | t Administrator  | 9-24               | 4-09        |
| Signature of Agency Head or Designe             |                         | Print Name            | 1,510               | Title  |                    | day, year)  |
| Comment: (Use this space or an                  | attachment for anv add  | ditional information  | on includina amena  | lment explanation.)  |                    | -5000500 TO |
| ,   | ,,                      |                       | J                   | · · · · · · · · · · · · · · · · · · ·  |                    |             |

| TICKETS | PRO\ | /IDED | BY  |
|---------|------|-------|-----|
| AG      | FNCY | REPO  | ากา |

| 1. Agency Name   | Date Stamp                   | California Ong         |
|--|------------------------------|------------------------|
| County of Los Angeles  |                              | Form OUZ               |
| Division, Department, or Region (if applicable)  |                              | For Official Use Only  |
| Board of Supervisor  |                              |                        |
| Street Address   |                              |                        |
| 500 W. Temple St., Room 869 Los Angeles, CA 90012  |                              |                        |
| Area Code/Phone Number   E-mail  | П <b>л</b>                   | (2-1-5-75)             |
| 213-974-5555 fifthdistrict.lacbos.org  | Amendment (Must exp.         |                        |
| Agency Contact (name and title)  | Date of Original Filing:     | (month day year)       |
| Linda Balderrama   |                              | (montri, day, year)    |
| 2. Event For Which Tickets Were Distributed  |                              |                        |
| Date(s) of Event: 09 104 109 Description of Event: Los Angeles                           | County Fair                  |                        |
|  |                              |                        |
|  |                              |                        |
| Agency Event ☐ Yes ☑ No (Identify source of tickets below.)                              |                              |                        |
| Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Cou                  | nty Fair                     | ·                      |
| Number of Tickets Received: 40 Ticket(s) Provided to Agency                              |                              | ☐ Pursuant to Contract |
| Number of fickets Neceived ficket(s) Frovided to Agency                                  | y. 🖾 Gratuitousiy [          |                        |
| 3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for addit            | ional names)                 |                        |
| Name of Official Number State Whetl  | her the Distribution is Inco | me to the Official or  |
|  | be the Public Purpose for    |                        |
|  |                              |                        |
|  | 13.45.4                      |                        |
|  |                              |                        |
|  |                              |                        |
|  |                              |                        |
| L  4. Individual or Organization Receiving Ticket(s) (Provided at the behest             | of an agency official )      |                        |
|  | or arragericy official.)     |                        |
| Name of Behesting Agency Official: Gino Sund, Chair                                      |                              |                        |
|  |                              | of Tieketer 40         |
| Name of Individual or Organization: Altadena Town Council                                | Number                       | of Tickets:            |
| Description of Organization: Elected Advisory Board                                      |                              |                        |
| 20.4.9.9.9.9.9.9.9.9.9.9.9.9.9.9.9.9.9.9.  |                              | 2                      |
| Address of Organization: 730 E. Altadena Dr Altadena                                     |                              | CA 91001               |
| Number and Street City   |                              | State Zip Code         |
| Purpose for Distribution: (Describe the public purpose for the distribution to the o     | rganization.)                |                        |
| Promoting intergovernmental relations  |                              |                        |
|  | 10010                        |                        |
| 5. Verification  |                              |                        |
| Unave determined that the distribution of tickets set forth above is in accordance with  | h the provisions of FPPC I   | Regulation 18944.1.    |
| Balden en Linda Balderrama Ticke   | t Administrator              | 9-24-09                |
| Signature of Agency Head or Designee Print Name  | Title                        | (month, day, year)     |
| Comment: (Use this space or an attachment for any additional information including amend | lment explanation.)          |                        |
|  |                              |                        |

| TICKETS PROVIDED | B | ١ |
|------------------|---|---|
| AGENCY REPO      | R | 1 |

| 1. Agency Name   | Date Stamp Californ  | ia QAS          |
|--|--|-----------------|
| County of Los Angeles  | Form   | 002             |
| Division, Department, or Region (if applicable)  | For Offi   | cial Use Only   |
| Board of Supervisor  |  |                 |
| Street Address   |  |                 |
| 500 W. Temple St., Room 869 Los Angeles, CA 90012  |  |                 |
| Area Code/Phone Number E-mail  | [] Amondment (Automorphics)  |                 |
| 213-974-5555 fifthdistrict.lacbos.org  | Amendment (Must explain in Part 5.)  |                 |
| Agency Contact (name and title)  | Date of Original Filing:(month, day,   | work            |
| Linda Balderrama   | (monar, day,   | year)           |
| 2. Event For Which Tickets Were Distributed  |  |                 |
| Date(s) of Event: 09 / 04 / 09 Description of Event: 1   | os Angeles County Fair   |                 |
|  |  |                 |
|  | 17.00  |                 |
| Agency Event ☐ Yes ☑ No (Identify source of tickets b  | elow.)   |                 |
|  | 1.5%   |                 |
| Name of Outside Source of Ticket(s) Provided to Agency: Los Ar   | igoroc county i an   |                 |
| Number of Tickets Received:40 Ticket(s) Provide  | d to Agency: ☑ Gratuitously ☐ Pursuar  | nt to Contract  |
|  |  |                 |
| <ol><li>Agency Official(s) Receiving Ticket(s) (use a continuation st</li></ol>  | eet for additional names)  |                 |
| Name of Official Number  | State Whether the Distribution is Income to the C  |                 |
| (Last, First) of Tickets   | Describe the Public Purpose for the Distribu   | tion            |
|  |  |                 |
|  |  |                 |
|  |  |                 |
|  |  |                 |
|  |  |                 |
| ـــــــــــــــــــــــــــــــــــــ  | t the behest of an agency official.)   |                 |
|  | it the beneat of all agency emolal.)   |                 |
| Name of Behesting Agency Official: Steve Pierce, Chair   | CONTRACTOR OF THE CONTRACTOR O |                 |
| Name of Individual or Organization: Crescenta Town Council   |  | . 40            |
| Name of Individual or Organization:  | Number of Tickets  | :               |
|  |  |                 |
|  |  |                 |
| Description of Organization: Elected Advisory Board  |  |                 |
| Description of Organization: Elected Advisory Board  | _a Crescent CA 91:   | 214             |
| Description of Organization: Elected Advisory Board  | _a Crescent CA 91:   | 214<br>Zip Code |
| Description of Organization: Elected Advisory Board  Address of Organization: PO Box 8676  Number and Street   | City State   |                 |
| Description of Organization:  Elected Advisory Board  Address of Organization: PO Box 8676  Number and Street  Purpose for Distribution: (Describe the public purpose for the distribution)                              | City State   |                 |
| Description of Organization: Elected Advisory Board  Address of Organization: PO Box 8676  Number and Street   | City State   |                 |
| Description of Organization:  Elected Advisory Board  Address of Organization:  PO Box 8676  Number and Street  Purpose for Distribution: (Describe the public purpose for the distribution) intergovernmental relations | City State   |                 |
| Description of Organization:    Elected Advisory Board   | City State   | Zip Code        |
| Description of Organization:  Elected Advisory Board  Address of Organization:  PO Box 8676  Number and Street  Purpose for Distribution: (Describe the public purpose for the distribution) intergovernmental relations | City State   | Zip Code        |
| Description of Organization:    Elected Advisory Board   | City State   | Zip Code        |

## **A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

| 1. Agency Name  |  |  |                     | Date Stamp   | California Q02         |
|---|--|--|---------------------|--|------------------------|
| County of Los Angeles   |  |  |                     | w-   | Form OUZ               |
| Division, Department, or Regi                                   | ion (if applicable)                          |  |                     |  | For Official Use Only  |
| Board of Supervisor   |  |  |                     |  |                        |
| Street Address  | **   |  |                     |  |                        |
| 500 W. Temple St., Room 8                                       | 369 Los Angeles, C                           | CA 90012                               |                     | 7  |                        |
| Area Code/Phone Number  | E-mail                                       | TMBWAY                                 |                     | Amendment (Must ex   | nlain in Part 5 \      |
| 213-974-5555  | fifthdistrict.lacbos                         | s.org                                  |                     | Amendment (wastex  | Dialit III Fait 3.)    |
| Agency Contact (name and title)                                 |  |  |                     | Date of Original Filing: _   | (month, day, year)     |
| Linda Balderrama  |  |  |                     |  | (month, day, year)     |
| 2. Event For Which Tickets                                      | Were Distribut                               | ed                                     |                     | - H H H  |                        |
| Date(s) of Event:09/_0  |  |  | nt: Los Angeles     | s County Fair  |                        |
|   | - 00   |  |                     | 47.00  |                        |
| _10 /_0.  | <u>-                                    </u> | Value of Ticke                         | et: \$              | 17.00  |                        |
| Agency Event ☐ Yes  | ☑ No (Identify section)                      |  | 8.0                 |  |                        |
| Name of Outside Source of T                                     | Ticket(s) Provided                           | to Agency: Lo                          | s Angeles Cou       | nty Fair   |                        |
| Number of Tickets Received:                                     | 10   |  |                     | Name of the Control  | ☐ Pursuant to Contract |
| 3. Agency Official(s) Recei                                     | ving Ticket(s) (u                            | se a continuation                      | on sheet for addit  | tional names)  |                        |
| Name of Offic   | ial  | Number                                 | 1                   | her the Distribution is Inc  |                        |
| (Last, First)   | *  | of Tickets                             | Descri              | be the Public Purpose for  | the Distribution       |
|   |  |  |                     |  |                        |
|   |  |  |                     |  |                        |
|   |  |  |                     |  |                        |
| <del></del>   |  |  |                     | NAME OF THE PARTY          |                        |
|   |  |  | -                   |  |                        |
| 4. Individual or Organizatio                                    | on Receiving Tic                             | ket(s) (Provid                         | led at the hehest   | of an agency official )  |                        |
| _   | _  | ************************************** |                     | or arragericy emolar.)   |                        |
| Name of Behesting Agency (                                      | Official: Robert Mo                          | onk, Executive                         | Director            |  |                        |
|   |  |  |                     |  | n of Tipleston 10      |
| Name of Individual or Organi                                    | ization:                                     | no olaboran                            | 3 1 00tillilo       | Numbe  | er of Tickets:         |
| Description of Organization:                                    | Organization for y                           | ouths                                  |                     | ****   |                        |
| DC.   | D Box 2386                                   |  | Monrovia            |  | CA 91017               |
| Address of Organization:  | nber and Street                              |  | City                |  | State Zip Code         |
| Purpose for Distribution: (De                                   | pagriba the public pu                        | rnaga far tha dis                      | stribution to the o | ragnization \  |                        |
| SO SOUTH CONTROL CONTROL SECTIONS AND SECTION SECTION SECTIONS. | O Jose Cod Hell Statistics 4                 | * 00 00 FM PD-0000 0000                |                     | 200 <del>-</del> 0.00 0.000 ± 0.00 ± 0 |                        |
| Encouraging or recognizing                                      | significant academ                           | nic, athletic, or                      | public achieve      | ments  |                        |
| 5. Verification   |  |  |                     |  |                        |
| Lhave determined that the distri                                | ibution of tickets set                       | forth above is ir                      | n accordance witi   | h the provisions of FPPC   | Regulation 18944.1.    |
| I Boldenan  | Linda Balde                                  |  |                     | t Administrator  | 9-24-09                |
| Signature of Agency Head or Designe                             |  | Print Name                             |                     | Title  | (month, day, year)     |
| Comment: (Use this space or an                                  | n attachment for any ad                      | lditional informatio                   | on including amend  | lment explanation.)  | a 27 (100) 15          |

| TICKETS PROVIDED | В   |
|------------------|-----|
| AGENCY REPO      | 'nR |

| 1. Agency Name   | Date Stamp California O O O                              |
|--|--|
| County of Los Angeles  | Form OUZ   |
| Division, Department, or Region (if applicable)                                    | For Official Use Only                                    |
| Board of Supervisor  |  |
| Street Address   |  |
| 500 W. Temple St., Room 869 Los Angeles, CA 90012                                  |  |
| Area Code/Phone Number E-mail  | Amendment (Must explain in Part 5.)                      |
| 213-974-5555 fifthdistrict.lacbos.org  | Amendment (Musicexplain in Part 5.)                      |
| Agency Contact (name and title)  | Date of Original Filing:                                 |
| Linda Balderrama   | (monun, day, year)                                       |
| 2. Event For Which Tickets Were Distributed  |  |
| Date(s) of Event: 09 04 09 Description of Event: Los                               | Angeles County Fair                                      |
|  | 17.00  |
| race value of ricket. φ  | <del></del>  |
| Agency Event ☐ Yes ☑ No (Identify source of tickets below                          |  |
| Name of Outside Source of Ticket(s) Provided to Agency: Los Angel                  | es County Fair   |
| 40   | Agency: ⊠ Gratuitously ☐ Pursuant to Contract            |
| 3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet                | for additional names)                                    |
| Name of Official Number Sta  | te Whether the Distribution is Income to the Official or |
| (Last, First) of Tickets   | Describe the Public Purpose for the Distribution         |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| 4. Individual or Organization Receiving Ticket(s) (Provided at the                 | e behest of an agency official.)                         |
|  |  |
| Name of Behesting Agency Official: Jim Ventress, Executive Director                | !  |
| Name of Individual or Organization: Santa Clarita Valley Boys & Gir                | s club Number of Tickets: 40                             |
|  | Number of fickets.                                       |
| Description of Organization: Organization for youths                               |  |
| Address of Organization: 24909 Newhall Ave. Sant                                   | a Clarita CA 91322                                       |
| Number and Street  | City State Zip Code                                      |
| Purpose for Distribution: (Describe the public purpose for the distribution        | to the organization.)                                    |
| Encouraging or recognizing significant academic, athletic, or public               | achievements   |
|  | 20/2   |
| 5. Verification  |  |
| I have determined that the distribution of tickets set forth above is in accord-   | nnce with the provisions of FPPC Regulation 18944.1.     |
| Linda Balderrama   | Ticket Administrator 9-24-09                             |
| Signature of Agency Head or Designee Print Name                                    | Title (month, day, year)                                 |
| Comment: (Use this space or an attachment for any additional information including | ng amendment explanation.)                               |
|  |  |

| <b>ICKETS PROVIDED</b> | B | ١ |
|------------------------|---|---|
| AGENCY REPO            | R | 1 |

| 1. Agency Name   |  |                     | Date Stamp                             | California Ono        |
|--|--|---------------------|--|-----------------------|
| County of Los Angeles  |  |                     | *                                      | Form OUZ              |
| Division, Department, or Region (if applicable)  | - 400000                                 |                     |  | For Official Use Only |
| Board of Supervisor  |  |                     |  |                       |
| Street Address   |  | 1994                |  |                       |
| 500 W. Temple St., Room 869 Los Angeles, C   | A 90012                                  |                     |  |                       |
| Area Code/Phone Number   E-mail  | * AA ( * * * * * * * * * * * * * * * * * |                     |  |                       |
| 213-974-5555 fifthdistrict.lacbos  | .ora                                     |                     | │                                      | lain in Part 5.)      |
| Agency Contact (name and title)  | <u> </u>                                 |                     | Date of Original Filing:               | (month, day, year)    |
| Linda Balderrama   |  |                     |  | (month, day, year)    |
| 2. Event For Which Tickets Were Distribute   | ed                                       |                     |  |                       |
|  |  | nt: Los Angeles     | s County Fair                          |                       |
| 40 05 00   |  |                     | 47.00                                  |                       |
|  | Value of Ticke                           | et: \$              | 17.00                                  |                       |
| Agency Event ☐ Yes ☒ No (Identify s  | source of ticke                          | ts below.)          |  |                       |
| Name of Outside Source of Ticket(s) Provided   |  | - 1                 | nty Fair                               |                       |
|  | to Agency:                               |                     |  |                       |
| Number of Tickets Received:40  | Ticket(s) Pro                            | vided to Agenc      | y: ⊠ Gratuitously [                    | ☐ Pursuant to Contrac |
| 3. Agency Official(s) Receiving Ticket(s) (u   | se a continuation                        | on sheet for addit  | tional names)                          |                       |
| Name of Official   | Number                                   |                     | her the Distribution is Inco           |                       |
| (Last, First)  | of Tickets                               | Descri              | be the Public Purpose for              | the Distribution      |
|  |  |                     |  |                       |
|  |  |                     | 7.0                                    |                       |
|  |  |                     |  |                       |
| The second secon |  |                     |  |                       |
|  |  | :                   |  |                       |
| 4. Individual or Organization Receiving Tid  | ket(s) (Provid                           | led at the behesi   | t of an agency official.)              |                       |
| •  |  |                     | · · · · · · · · · · · · · · · · · · ·  |                       |
| Name of Behesting Agency Official: Deputy Sh   | erin Art valen                           | zuela               | * *** ** ** ** ** ** ** *** *** *** ** |                       |
| Name of Individual or Organization: Youth Acti   | vities League                            | - Pamela Park       | NT 1                                   | of Tiakata. 10        |
|  |  |                     | Number                                 | of Tickets:           |
| Description of Organization: Organization for y  | ouths                                    |                     |  |                       |
| Decomption of organization.  |  |                     |  |                       |
| Address of Organization: 2236 Goodall Ave.   |  | Duarte              |  | CA 91010              |
| Number and Street  |  | City                |  | State Zip Code        |
| Purpose for Distribution: (Describe the public pur   | rpose for the dis                        | stribution to the o | organization.)                         |                       |
| Encouraging or recognizing significant academ  | nic. athletic. or                        | public achieve      | ments                                  |                       |
|  | ,  | parite delitere     |  |                       |
| 5. Verification  |  |                     |  |                       |
| I have determined that the distribution of tickets set i   | forth above is ir                        | accordance with     | h the provisions of FPPC I             | Regulation 18944 1    |
|  |  |                     | SP 1                                   |                       |
| A Guldenama Linda Balde  |  | Ticke               | t Administrator                        | 9-24-09               |
|  | Print Name                               |                     | Title                                  | (month, day, year)    |
| Comment: (Use this space or an attachment for any ad   | lditional information                    | on including amend  | lment explanation.)                    |                       |
|  |  |                     |  |                       |

| ICKETS PROVIDED | В | Y |
|-----------------|---|---|
| AGENCY REPO     | R | Т |

| 1. Agency Name  |                                 |  | Date Stamp  | California 000                               |
|---|---------------------------------|--|---|--|
| County of Los Angeles   |                                 |  | **  | Form OUZ                                     |
| Division, Department, or Region (if a                                     | pplicable)                      |  | 1   | For Official Use Only                        |
| Board of Supervisor   |                                 |  |   | 2  |
| Street Address  | 9                               |  | 1   |  |
| 500 W. Temple St., Room 869 Lo  | s Angeles, CA 90012             |  |   |  |
|   | Area Code/Phone Number   E-mail |  |   |  |
| 213-974-5555 fifthd   | istrict.lacbos.org              |  | Amendment (Must ex  | plain in Part 5.)                            |
| Agency Contact (name and title)   |                                 |  | Date of Original Filing: _  | (month, day, year)                           |
| Linda Balderrama  |                                 |  |   | (month, day, year)                           |
| 2. Event For Which Tickets Were   | e Distributed                   |  |   |  |
| Date(s) of Event:   |                                 | vent: Los Angele   | s County Fair   |  |
|   | 20                              |  | 47.00   |  |
| <u> 10 ) 00 ) </u>  | Face Value of T                 | icket: \$  |   |  |
|   | No (Identify source of ti       | •  |   |  |
| Name of Outside Source of Ticket(   | s) Provided to Agency:          | Los Angeles Cou  | unty Fair   |  |
| Number of Tickets Received:4  | 0                               |  |   | ☐ Pursuant to Contract                       |
| successible rise search or success as successible successible successible |                                 | 2 VOIC 200300000000 VOIC POOL CONTRACT   | on the control of th |  |
| 3. Agency Official(s) Receiving   | Ticket(s) (use a continu        | uation sheet for add   | itional names)  |  |
| Name of Official  | Numbe                           |  | ther the Distribution is Inc  |  |
|   |                                 | s Descr  | ibe the Public Purpose for  | the Distribution                             |
|   |                                 |  |   |  |
| 1   |                                 |  |   |  |
|   |                                 |  |   |  |
|   | CL (6.2.5.6.20)                 | The same of the same   |   |  |
|   |                                 |  |   |  |
| 4. Individual or Organization Re  | ceiving Ticket(s) (Pr           | ovided at the behes  | at of an agency official )  |  |
| _   |                                 |  | and the special property of the contraction of  |  |
| Name of Behesting Agency Official   | : Irving Montenegro, R          | lec. Services Sup  | ervisor   |  |
|   | Developed                       |  |   | or of Ticketo. 10                            |
| Name of Individual or Organization  | ·                               | - Alberta - Albe | Numbe   | er of Tickets:                               |
| Description of Organization: Los A  | ngeles County park              |  |   |  |
| Description of Organization.  |                                 |  |   |  |
| Address of Organization: 2236 Go  | odall Ave.                      | Duarte   |   | CA 91010                                     |
| Number and  | Street                          | City   |   | State Zip Code                               |
| Purpose for Distribution: (Describe                                       | the public purpose for the      | distribution to the  | organization.)  |  |
| Supporting & appreciation for com   | munity and nonprofit p          | ograms or service  | es that benefit County r  | esidents                                     |
|   | ,                               | -9   |   |  |
| 5. Verification   |                                 |  |   |  |
| I have determined that the distribution                                   | of tickets set forth above      | is in accordance wil   | th the provisions of FPPC   | Regulation 18944 1                           |
| 7 0.01  |                                 |  |   | 30 40 50 Service 304 Service 304 Service 305 |
| 196ldenan   | Linda Balderrama                | Ticke  | et Administrator  | 9-24-09                                      |
| Signature of Agency Head or Designee                                      | Print Name                      |  | Title   | (month, day, year)                           |
| Comment: (Use this space or an attachi                                    | ment for any additional inform  | nation including amen  | dment explanation.)   |  |

| <b>TICKETS</b> | PRO  | VIDI | ED | B١ |
|----------------|------|------|----|----|
| AGI            | ENCY | RF   | PO | R  |

| 1. Agency Name  County of Los Angeles                   |   |  | Date Stamp                              | California 802                     |  |  |
|---|---|--|---|------------------------------------|--|--|
|   |   |  |   | Tollii CC                          |  |  |
| Division, Department, or Region (if applicable)         |   |  |   | For Official Use Only              |  |  |
| Board of Supervisor                                     |   |  |   |                                    |  |  |
| Street Address  |   |  |   |                                    |  |  |
| 500 W. Temple St., Room 869 Los Angeles,                | CA 90012                                |  |   |                                    |  |  |
| Area Code/Phone Number E-mail                           |   |  | ☐ Amendment (Must                       | explain in Part 5.)                |  |  |
| 213-974-5555 fifthdistrict.lacbo                        | s.org                                   |  |   | «Совресовоточно меня Атом Голов» I |  |  |
| Agency Contact (name and title)                         | 3,000 10 10                             |  | Date of Original Filing                 | (month, day, year)                 |  |  |
| Linda Balderrama  |   |  |   |                                    |  |  |
| 2. Event For Which Tickets Were Distribu                | ted                                     |  |   |                                    |  |  |
| Date(s) of Event:0904                                   | cription of Eve                         | nt: Los Angeles  | s County Fair                           |                                    |  |  |
| 40 05 00  | e Value of Tick                         |  | 17.00                                   |                                    |  |  |
| rac   | e value of fick                         | е. ф   | ::::::::::::::::::::::::::::::::::::::: |                                    |  |  |
| Agency Event ☐ Yes ☑ No (Identify                       | source of ticke                         | ets below.)  |   |                                    |  |  |
| Name of Outside Source of Ticket(s) Provided            | to Agency: Lo                           | s Angeles Cou  | nty Fair                                |                                    |  |  |
| 10  |   |  |   | 10 ve vii                          |  |  |
| Number of Tickets Received:40                           | Ticket(s) Pro                           | vided to Agenc   | y: ⊠ Gratuitously                       | ☐ Pursuant to Contrac              |  |  |
| Aganay Official(a) Bassiving Ticket(a)                  |   |  | C                                       |                                    |  |  |
| 3. Agency Official(s) Receiving Ticket(s)               |   |  |   |                                    |  |  |
|   |   | ther the Distribution is Income to the Official or be the Public Purpose for the Distribution  |   |                                    |  |  |
|   | Of Florida                              | 200011   | be the rabile raipede                   | or the Biothbutton                 |  |  |
| Debra Rodarte 2 Retain                                  |   | Retaining hig  | g highly qualified County employees     |                                    |  |  |
|   |   |  | - 4                                     |                                    |  |  |
|   |   |  |   |                                    |  |  |
|   | 0.0000000000000000000000000000000000000 |  |   |                                    |  |  |
|   |   |  |   |                                    |  |  |
| . Individual or Organization Receiving T                | i <b>cket(s)</b> (Provid                | ded at the behest  | t of an agency official.)               |                                    |  |  |
| Name of Behesting Agency Official:                      |   |  |   |                                    |  |  |
|   |   |  |   |                                    |  |  |
| Name of Individual or Organization:                     |   | -  | Numl                                    | oer of Tickets:                    |  |  |
|   |   |  |   |                                    |  |  |
| Description of Organization:                            |   |  |   |                                    |  |  |
| Address of Organization:                                |   |  |   |                                    |  |  |
| Address of Organization: Number and Street              |   | City   |   | State Zip Code                     |  |  |
| Purpose for Distribution: (Describe the public p        | urnose for the dis                      | stribution to the o  | organization )                          |                                    |  |  |
| r diposo ioi biolibadioni (bossibo dio pabio p          | arpood for the di                       |  | ngumzadom.)                             |                                    |  |  |
|   |   | - Control of the cont |   |                                    |  |  |
| . Verification  |   |  |   |                                    |  |  |
|   | t forth above is in                     | a accordance with  | h the provisions of EDC                 | C Population 19044 1               |  |  |
| I have indigramined that the distribution of tickets so | CIOILII ADOVE IS II                     | i accordance Will  | n me provisions of FPP                  | o Negulation 10944.1.              |  |  |
| I have determined that the distribution of tickets se   |   |  |   |                                    |  |  |
| I nave pretermined that the distribution of tickets se  | lerrama                                 | Ticke  | t Administrator                         | 9-24-09                            |  |  |

| ICKETS | PROV | IDED | BY |
|--------|------|------|----|
| AGI    | ENCY | REPO | RT |

| 1. Agency Name   |                      |                     | Date Stamp   | California OOO         |  |
|--|----------------------|---------------------|--|------------------------|--|
| County of Los Angeles                                  |                      |                     |  | Form OUZ               |  |
| Division, Department, or Region (if applicable)        |                      |                     |  | For Official Use Only  |  |
| Board of Supervisor                                    |                      |                     |  |                        |  |
| Street Address   |                      |                     |  |                        |  |
| 500 W. Temple St., Room 869 Los Angeles, C             | A 90012              |                     |  |                        |  |
| Area Code/Phone Number   E-mail                        | - W                  |                     |  |                        |  |
| 213-974-5555 fifthdistrict.lacbos                      | .org                 |                     | ☐ Amendment (Must exp                              | iain in Part 5.)       |  |
| Agency Contact (name and title)                        |                      |                     | Date of Original Filing:                           | (month day year)       |  |
| Linda Balderrama                                       |                      |                     |  | (month, day, year)     |  |
| 2. Event For Which Tickets Were Distribute             | ed                   |                     |  | *                      |  |
| Date(s) of Event:090409 Desc                           | ription of Eve       | nt. Los Angeles     | s County Fair                                      |                        |  |
| 10 , 05 , 09 Face                                      |                      |                     |  |                        |  |
| Face   | Value of Ticke       | et: \$              |  |                        |  |
| Agency Event ☐ Yes ☑ No (Identify s                    | source of ticke      | ets below.)         |  |                        |  |
| Name of Outside Source of Ticket(s) Provided           | to Agency, Lo        | s Angeles Cou       | nty Fair   |                        |  |
|  | to Agency            |                     |  |                        |  |
| Number of Tickets Received:40                          | Ticket(s) Pro        | vided to Agenc      | y: ⊠ Gratuitously [                                | ☐ Pursuant to Contract |  |
| 3. Agency Official(s) Receiving Ticket(s) (u           | se a continuatio     | on sheet for addit  | tional names)                                      |                        |  |
|  |                      |                     | ther the Distribution is Income to the Official or |                        |  |
| (Last, First)  | of Tickets           | Descri              | be the Public Purpose for                          | the Distribution       |  |
| Susie Osuna  | 2                    | Retaining hig       | ing highly qualified County employees              |                        |  |
|  |                      | 3                   | Trotaining rightly qualified obtainly employees    |                        |  |
|  |                      |                     |  |                        |  |
|  |                      |                     | - 1912<br>- 1912                                   |                        |  |
|  |                      |                     |  |                        |  |
| 4. Individual or Organization Receiving Tic            | ket(s) (Provid       | ded at the behest   | of an agency official.)                            |                        |  |
| Name of Dahastina Assault Officials                    |                      |                     |  |                        |  |
| Name of Behesting Agency Official:                     |                      |                     |  |                        |  |
| Name of Individual or Organization:                    |                      |                     | Number   | r of Tickets:          |  |
|  | 1                    |                     |  |                        |  |
| Description of Organization:                           |                      |                     |  |                        |  |
|  |                      |                     |  |                        |  |
| Address of Organization:                               | V 10 1 10 1          | City                |  | State Zip Code         |  |
|  | 100 100 100          |                     |  | 2.p 3333               |  |
| Purpose for Distribution: (Describe the public pur     | pose for the dis     | stribution to the o | rganization.)                                      |                        |  |
|  |                      |                     |  |                        |  |
|  |                      |                     | 183  |                        |  |
| 5. Verification  |                      |                     |  |                        |  |
| I have determined that the distribution of tickets set | forth above is ir    | n accordance with   | h the provisions of FPPC I                         | Regulation 18944.1.    |  |
| Linda Balde  | errama               | Ticke               | t Administrator                                    | 9-24-09                |  |
| Signature of Agency Head or Designee                   | Print Name           |                     | Title  | (month, day, year)     |  |
| Comment: (Use this space or an attachment for any ad   | ditional information | on including amend  | lment explanation.)                                |                        |  |
|  |                      |                     |  |                        |  |

| TICKETS | PF | ROV | /IDE | ΞD | B | Y |
|---------|----|-----|------|----|---|---|
| AG      | EN | CY  | RE   | PO | R | Т |

| 1. Agency Name   |                       |                           | Date Stamp                        | California OOO        |  |
|--|-----------------------|---------------------------|-----------------------------------|-----------------------|--|
| County of Los Angeles  |                       |                           |                                   | Form OUZ              |  |
| Division, Department, or Region (if applicable)  |                       |                           |                                   | For Official Use Only |  |
| Board of Supervisor  |                       |                           | •                                 |                       |  |
| Street Address   |                       |                           |                                   | 45                    |  |
| 500 W. Temple St., Room 869 Los Angeles, C   | A 90012               |                           |                                   |                       |  |
| Area Code/Phone Number E-mail  |                       |                           | Amondment (Marker)                | Join to Deal EV       |  |
| 213-974-5555 fifthdistrict.lacbos  | s.org                 |                           | ☐ Amendment (Must exp             | iain in Part 5.)      |  |
| Agency Contact (name and title)  |                       |                           | Date of Original Filing:          | (month, day, year)    |  |
| Linda Balderrama   |                       |                           |                                   | (monun, day, year)    |  |
| 2. Event For Which Tickets Were Distribute   | ed                    |                           |                                   |                       |  |
| Date(s) of Event:09 _/_04 _/_09 Desc   |                       | nt. Los Angeles           | s County Fair                     |                       |  |
|  |                       |                           |                                   |                       |  |
|  | Value of Tick         | et: \$                    | 17.00                             |                       |  |
| Agency Event ☐ Yes ☑ No (Identify s  | source of ticke       | ets below.)               |                                   |                       |  |
| Name of Outside Source of Ticket(s) Provided I   | Lo                    | s Angeles Cou             | ntv Fair                          |                       |  |
| Name of Outside Source of Ticket(s) Provided to  | to Agency:            |                           | ,                                 |                       |  |
| Number of Tickets Received: 40   | Ticket(s) Pro         | vided to Agenc            | y: 🗵 Gratuitously [               | ☐ Pursuant to Contrac |  |
| 3. Agency Official(s) Receiving Ticket(s) (us  | se a continuatio      | AND CONTRACTOR STATES     |                                   |                       |  |
| Name of Official<br>(Last, First)  | Number<br>of Tickets  |                           | her the Distribution is Inco      |                       |  |
| (2004)   | OI TICKETS            | Descri                    | be the Public Purpose for         | the Distribution      |  |
| Sandra Cruz  | 2                     | Retaining hig             | highly qualified County employees |                       |  |
|  | 1 100 100 100         | 01 100                    |                                   |                       |  |
|  |                       |                           |                                   |                       |  |
|  |                       | MC 35 Vo 39               | -                                 |                       |  |
|  |                       |                           |                                   |                       |  |
| 4. Individual or Organization Receiving Tic  | <b>ket(s)</b> (Provid | ded at the behest         | of an agency official.)           |                       |  |
| Name of Behesting Agency Official:   |                       |                           |                                   |                       |  |
| Name of Benesting Agency Official.   |                       | 3 10 050 <del>5</del> 050 | a variable and a second           |                       |  |
| Name of Individual or Organization:  | 2002000 40            | _                         | Number                            | r of Tickets:         |  |
|  | W-0                   |                           |                                   | or riokoto.           |  |
| Description of Organization:   |                       |                           |                                   |                       |  |
|  |                       |                           |                                   |                       |  |
| Address of Organization:   |                       | City                      |                                   | Slate Zip Code        |  |
|  |                       | 50000 <b>€</b> 75         |                                   | State Zip Code        |  |
| Purpose for Distribution: (Describe the public pur   | rpose for the dis     | stribution to the o       | rganization.)                     |                       |  |
|  |                       |                           |                                   | V 20                  |  |
|  |                       |                           |                                   |                       |  |
| 5. Verification  |                       |                           |                                   |                       |  |
| I have determined that the distribution of tickets set f   | forth above is in     | accordance witl           | n the provisions of FPPC I        | Regulation 18944.1.   |  |
| The Hally and Linda Balde  | errama                | Ticke                     | t Administrator                   | 9-24-09               |  |
| A TOUR CASE OF THE PROPERTY OF | Print Name            | 1101/6                    | Title                             | (month, day, year)    |  |
| Comment: (Use this space or an attachment for any add  | ditional information  | on includina amend        |                                   | ,,,                   |  |
| ,  |                       |                           |                                   |                       |  |
|  |                       |                           |                                   |                       |  |

| TICKETS PROVIDED | B |
|------------------|---|
| AGENCY REPO      | R |

| 1. Agency Name   |                      |                     | Date Stamp                   | California OOO                   |
|--|----------------------|---------------------|------------------------------|----------------------------------|
| County of Los Angeles  |                      |                     |                              | Form 802                         |
| Division, Department, or Region (if applicable)  |                      |                     |                              | For Official Use Only            |
| Board of Supervisor  |                      |                     |                              |                                  |
| Street Address   |                      |                     |                              |                                  |
| 500 W. Temple St., Room 869 Los Angeles, CA 90012  |                      |                     |                              |                                  |
| Area Code/Phone Number   E-mail  |                      |                     | 2                            | All the bus stated distributions |
| 213-974-5555 fifthdistrict.lacbos  | ora                  |                     | ☐ Amendment (Must exp        | olain in Part 5.)                |
| Agency Contact (name and title)  | .019                 | W000                | Date of Original Filing: _   |                                  |
| Linda Balderrama   |                      |                     |                              | (month, day, year)               |
| 2. Event For Which Tickets Were Distribute   | ed                   |                     |                              |                                  |
| Date(s) of Event: 09 / 04 / 09 Desc  | ription of Ever      | nt: Los Angeles     | s County Fair                |                                  |
| 10 / 05 / 09 Face  |                      |                     |                              |                                  |
| Face   | value of Ticke       | ⊰ι. ⊅               |                              |                                  |
| Agency Event ☐ Yes ☒ No (Identify s  | ource of ticke       | ts below.)          |                              |                                  |
| Name of Outside Source of Ticket(s) Provided t   | to Agency: <u>Lo</u> | s Angeles Cou       | nty Fair                     |                                  |
| Number of Tickets Received: 40   | Ticket(s) Pro        | vided to Agenc      | y: ⊠ Gratuitously            | ☐ Pursuant to Contract           |
| 3. Agency Official(s) Receiving Ticket(s) (us  | se a continuatio     | on sheet for addit  | ional names)                 |                                  |
| Name of Official   | Number               | State Whet          | her the Distribution is Inco | ome to the Official or           |
| (Last, First)  | of Tickets           | Descri              | be the Public Purpose for    | the Distribution                 |
| Cathey Hunter  | 2                    | Retaining hig       | hly qualified County en      | nployees                         |
|  |                      |                     |                              |                                  |
|  |                      |                     | 11000000 - 1100001100        | 2 2 2                            |
|  |                      |                     |                              |                                  |
| 4. Individual or Organization Receiving Tic  | ket(s) (Provid       | ded at the behest   | of an agency official.)      |                                  |
| Name of Debooting Among Official   |                      |                     |                              |                                  |
| Name of Behesting Agency Official:   |                      |                     | 2590300                      |                                  |
| Name of Individual or Organization:  |                      |                     | Numbe                        | r of Tickets:                    |
| or productive detailed and the control of the contr |                      |                     |                              |                                  |
| Description of Organization:   |                      |                     |                              | <del>_</del>                     |
| Address of Organization:   |                      |                     |                              |                                  |
| Number and Street  |                      | City                | 70.41 N                      | State Zip Code                   |
| Purpose for Distribution: (Describe the public pur   | pose for the dis     | stribution to the o | rganization.)                |                                  |
|  |                      |                     |                              |                                  |
|  | Tara .               | 71 979              | - Asse-                      | <u> </u>                         |
| 5. Verification  |                      |                     |                              |                                  |
| I have determined that the distribution of tickets set t   | forth above is in    | n accordance witi   | h the provisions of FPPC     | Regulation 18944.1.              |
| Adden A Linda Balde  |                      |                     | t Administrator              | 9-24-09                          |
|  | Print Name           | 11010               | Title                        | (month, day, year)               |
| Comment: (Use this space or an attachment for any add  | ditional information | on including amend  | lment explanation.)          |                                  |
| •  |                      | =3                  | . 20                         |                                  |

| TICKETS PROVIDED | В |
|------------------|---|
| AGENCY REPO      | R |

| 1. Agency Name   |                     |                      | Date Stamp                              | California OOO         |  |
|--|---------------------|----------------------|---|------------------------|--|
| County of Los Angeles                                    |                     |                      |   | Form OUZ               |  |
| Division, Department, or Region (if applicable)          |                     |                      |   | For Official Use Only  |  |
| Board of Supervisor                                      |                     |                      |   |                        |  |
| Street Address   |                     |                      |   |                        |  |
| 500 W. Temple St., Room 869 Los Angeles, C.              | A 90012             |                      |   |                        |  |
| Area Code/Phone Number E-mail                            |                     |                      | Amendment (Must exp.                    | lain in Part 5 )       |  |
| 213-974-5555 fifthdistrict.lacbos                        | .org                |                      | Amendment (Mast exp                     | an in r arc s.y        |  |
| Agency Contact (name and title)                          |                     |                      | Date of Original Filing:                | (month, day, year)     |  |
| Linda Balderrama   |                     |                      | 2                                       | (monal, day, year)     |  |
| 2. Event For Which Tickets Were Distribute               | ed                  | 3 000                |   |                        |  |
| Date(s) of Event: 09 / 04 / 09 Descri                    | ription of Ever     | nt: Los Angeles      | s County Fair                           |                        |  |
| 10 , 05 , 09 Face  |                     |                      |   |                        |  |
|  |                     |                      |   |                        |  |
| Agency Event ☐ Yes ☒ No (Identify s                      |                     | 5.00                 |   |                        |  |
| Name of Outside Source of Ticket(s) Provided t           | o Agency: Lo        | s Angeles Cou        | nty Fair                                |                        |  |
| Number of Tickets Received:40                            | Ticket(s) Pro       | vided to Agenc       | y: 🗵 Gratuitously [                     | ☐ Pursuant to Contract |  |
| 3. Agency Official(s) Receiving Ticket(s) (us            | se a continuatio    | on sheet for addit   | tional names)                           |                        |  |
| Name of Official   | Number              | State Whet           | her the Distribution is Inco            | me to the Official or  |  |
| (Last, First)  | of Tickets          | Descri               | be the Public Purpose for               | the Distribution       |  |
| Lori Glasgow   | 2                   | Retaining hig        | highly qualified County employees       |                        |  |
|  |                     |                      |   |                        |  |
| ·  |                     |                      | V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |                        |  |
|  |                     |                      |   |                        |  |
| 4. Individual or Organization Receiving Tic              | ket(s) (Provid      | ded at the behest    | of an agency official.)                 |                        |  |
| No. of Bull and the American Officials                   |                     |                      |   |                        |  |
| Name of Behesting Agency Official:                       |                     |                      |   |                        |  |
| Name of Individual or Organization:                      |                     |                      | Number                                  | r of Tickets:          |  |
|  |                     |                      |   |                        |  |
| Description of Organization:                             |                     |                      |   |                        |  |
| Address of Organization:                                 | 4 5 500 E-355       | City                 |   | State Zip Code         |  |
| Purpose for Distribution: (Describe the public pur       | nose for the dis    | stribution to the o  | rganization )                           |                        |  |
| Turpose for Distribution. (Describe the public pur       | pose for the dis    | stribution to trie o | rgariization.)                          |                        |  |
|  |                     |                      |   |                        |  |
| 5. Verification  |                     |                      |   |                        |  |
| I have determined that the distribution of tickets set f | orth above is in    | n accordance witi    | h the provisions of FPPC I              | Regulation 18944.1.    |  |
| J Belders and Linda Balde                                |                     |                      | t Administrator                         | 9-24-09                |  |
| 11 11 -0 0000  | Print Name          | 11010                | Title                                   | (month, day, year)     |  |
| Comment: (Use this space or an attachment for any add    | ditional informatio | on including amend   | lment explanation.)                     |                        |  |
|  |                     |                      |   |                        |  |

| ICKETS PROVIDED | B  |   |
|-----------------|----|---|
| AGENCY REPO     | B. | 1 |

| 1. Agency Name   |                     |  | Date Stamp                                 | California 802         |
|--|---------------------|--|--|------------------------|
| County of Los Angeles  |                     |  |  | Form OUZ               |
| Division, Department, or Region (if applicable)  Board of Supervisor |                     |  |  | For Official Use Only  |
|  |                     |  |  |                        |
| Street Address   |                     |  |  |                        |
| 500 W. Temple St., Room 869 Los Angeles, C                           | A 90012             |  |  |                        |
| Area Code/Phone Number E-mail  |                     |  |  |                        |
| 213-974-5555 fifthdistrict.lacbos.org                                |                     | Amendment (Must explain in Part 5.)  |  |                        |
| Agency Contact (name and title)                                      |                     |  | Date of Original Filing:(month, day, year) |                        |
| Linda Balderrama   |                     |  |  | (month, day, year)     |
| 2. Event For Which Tickets Were Distribute                           | ed                  |  |  |                        |
| Date(s) of Event:09 _/_04 _/_09 Desc                                 |                     | Los Angeles  | s County Fair                              |                        |
|  |                     |  |  |                        |
| <u>10 / 05 / 09</u> Face   | Value of Ticke      | et: \$   | 17.00                                      |                        |
| Agency Event ☐ Yes ☑ No (Identify s                                  | source of ticke     | ets below.)  |  |                        |
| Name of Outside Source of Ticket(s) Provided                         |                     | 356  | ntv Fair                                   |                        |
| Name of Outside Source of Ticket(s) Provided to                      | to Agency: —        | o ,go.co oca   | ,  |                        |
| Number of Tickets Received:40  | Ticket(s) Pro       | vided to Agenc   | y: ⊠ Gratuitously [                        | ☐ Pursuant to Contract |
| 3. Agency Official(s) Receiving Ticket(s) (u                         | se a continuatio    | on sheet for addit   | tional names)                              |                        |
|  |                     | ther the Distribution is Income to the Official or ibe the Public Purpose for the Distribution |  |                        |
| (Last, Filst)  | of Tickets          | Descri   | be the Public Purpose for                  | the Distribution       |
| Mary Villegas  |                     | Retaining highly qualified County employees  |  |                        |
|  |                     | 000  |  |                        |
|  |                     | 201028   |  | <del></del>            |
|  |                     |  |  |                        |
| 4. Individual or Organization Receiving Tic                          | kot(c) (Provis      | lad at the behavi  | of an aganay official \                    |                        |
| 4. Individual of Organization Receiving Tic                          | Ker(S) (Provid      | ied at the benest  | or an agency oπicial.)                     |                        |
| Name of Behesting Agency Official:                                   |                     |  |  |                        |
|  |                     |  |  |                        |
| Name of Individual or Organization:                                  |                     |  | Number                                     | of Tickets:            |
| Description of Organization:   |                     |  |  |                        |
| Description of Organization:   |                     |  | ***  |                        |
| Address of Organization:   |                     |  |  |                        |
| Number and Street  |                     | City   |  | State Zip Code         |
| Purpose for Distribution: (Describe the public pur                   | pose for the dis    | stribution to the o  | rganization.)                              |                        |
|  |                     |  |  |                        |
|  |                     |  |  |                        |
| 5. Verification  |                     |  |  |                        |
| I have determined that the distribution of tickets set t             | forth above is ir   | accordance with  | h the provisions of EPPC I                 | Regulation 18944 1     |
| 4 // 24  |                     |  | 7-00                                       |                        |
| Linda Balderrama   |                     | Ticke  | t Administrator                            | 9-24-09                |
| Signature of Agency Head or Designee Print Name                      |                     |  | Title                                      | (month, day, year)     |
| Comment: (Use this space or an attachment for any add                | ditional informatio | on including amend   | lment explanation.)                        |                        |